

**FITNESS COMMITTEE  
MINUTES  
July 17, 2019  
5:00 PM**

The Fitness Committee held a public meeting on July 17, 2019, beginning at 5:07 p.m. at the following location:

Maryland Department of Health  
201 West Preston Street, Room 200  
Baltimore, Maryland 21201

**Members Present**

Jennifer Eastman  
Dr. Mychelle Farmer  
Namisa Kramer  
Julie Maneen  
Cameron Pollock  
Dr. Vivienne Rose

**Members Not Present**

Johnel Metcalf  
Dr. Aruna Nathan (chair)  
Joanne Roberts

**Maryland Department of Health Staff Present**

Melissa Beasley  
Amanda Klein

Namisa Kramer called the meeting to order at 5:07 p.m.

**1. Roll Call/Introductions**

Roll call was taken.

**2. Maryland Fitness Activities Handout**

Committee members discussed what counties are doing around physical activities. Dr. Farmer provided a handout that included most counties in Maryland. Many counties provide programming through Parks and Recreation. Calvert and Talbott Counties only have activities through private companies, such as gyms, that will not help the entire population. The four largest counties (Prince George's, Howard, Montgomery, and Baltimore) have many activities going on, but the activities may not be feasible for the smaller counties.

**3. Social Media Posts**

Melissa will determine who has the compiled list of social media posts and hashtags and send to the committee. Social media posts have been slow-moving through Maryland Department of Health's Communication Office due to limited staff.

**4. Walk Maryland Day**

Committee members discussed changes coming to the Walk Maryland initiative and potential involvement of the committee.

- Walk Maryland Day will now be a year-long initiative, focusing on attainable goals, to increase walking in Maryland. MDH will work closely with the local health departments (Dr. Farmer's list is a good place to start). There will be multiple events throughout the year based on themes, such as walking school buses in August, and will provide an opportunity to track participation, steps, number of walking groups, etc. The goal is to be more visible. This initiative is a good way to work around social determinants of health: accessibility, cost, disabilities, everyone can participate.
- The committee likes the idea of a long-term program instead of a one-day walking program.
- Should be tied to Fit150.
- Suggestions for tie-in initiatives:
  - Coordinate with World Wellness Weekend (September 21-22, 2019). Encourage businesses in the local health communities to offer free fitness classes, entry into their facilities, etc. to increase fitness.
  - Focus on kids, who are very competitive. Schools compete against how many books are read during the summer, do the same for how many steps they do.
  - There is a community-based hypertension group that does a "freedom walk" that is a virtual walking program that indicates how far you have walked towards a goal (like the Underground Railroad) that can build context for walking groups.
  - The ENOUGH campaign by the World Health Organization is a global week of action on non-communicable diseases taking place September 2-8, 2019. They have a big social media presence and we could amp up what the State of Maryland is doing.
    - Dr. Farmer will talk to someone from the American Academy of Pediatrics to see what we can do to mobilize around the ENOUGH campaign.

## **5. Dr. Nathan's Proposal**

The committee discussed the proposal drafted by Dr. Nathan (see attached proposal). We can provide feedback. The proposal will be formalized and presented to the Council October 16 for feedback and approval.

- Consensus that the plan is a good place to start.
- Train the trainer using evidence-based protocols. These presentations can be done anywhere to educate people. Train the CHWs to make these presentations.
- Suggestion that 1.5 hours is too long, suggest doing one hour to combat attention span.
- In the format, are there slides with pictures and a presentation/education component? The presentation is missing a doing component. There is some

exercise in here, suggest chunking the presentation 1/3 demo, 1/3 doing, 1/3 presentation.

- The plan specifically mentioned senior centers who already do a lot of evidence-based programming.
- Is the objective more about promoting the value of exercise targeting those who don't exercise? Doing it at the gym wouldn't make sense since they are there to exercise.
- What need are we meeting?
- What is the target population? People who typically don't exercise?
  - Encourage people to get more physically active need to be concrete about who we are targeting to fulfill that.
- What is meant by evidence-based? Is the committee actually creating an evidence-based program, or basing the program on recent studies that show evidence?
- What are the expectations and priorities of our committee members?

#### **6. Next steps**

- Continue meeting bi-weekly (starting July 24) to finalize Dr. Nathan's proposal.
- Melissa will find and send compiled social media content for review by the committee.

#### **7. Adjournment**

The meeting was adjourned at 5:57 p.m.

## **July 17 Proposal Sent by Dr. Nathan**

### Objectives:

- Increase awareness of the impact of a modest amount of physical activity on overall health outcomes of an individual and the community as a whole.
- Make physical activity enjoyable and easily accessible and part of a daily routine in the various communities in Maryland.
- Simplify the various components of exercise so it is easily understood and injuries reduced.

### Current problem

- Inactivity has become a normalcy.
- There are many community centers designed to help with keeping people active.
- There are many individuals in the community who have had a firsthand experience of how physical fitness has impacted their lives, many medical and physical personals, teachers and others who would like to volunteer in getting their communities healthy.
- However physical inactivity remains high in the general population of all ages.

### Plan.

- To make proper use of the various resources by connecting the different members of the community.
- Make Physical fitness a fun and purposeful activity.
- Starting with designing a presentation with demonstrations of simple examples of physical activity.
- Make it interactive and enjoyable.
- Partner with various senior centers, YMCA, local community centers.
- Each session will be about 1.5 hours max. These sessions should be standardized so more people can be trained to give similar presentations. Especially starting with the staff at these community centers, YMCA, etc.
  - Presentations should be given in a group format. Initially starting with a few slides and pictures impressing on the importance of physical activity and how very little time commitment is needed.
  - Then proceed to break the audience/ participants into four groups.
- Ideally, group size should be around 30 total. About 7-8 participants in each group. Each group will have a presenter and 7-8 participants.
- The four groups will be:
  - Endurance or Aerobic activity
  - Muscle strength
  - Flexibility
  - Balance
- Simple exercise demos and a few slides linking how each of these types of exercise can help.

- Examples, prevent injuries, falls, better metabolic health, etc.
- Having a few sessions at one community center will influence the people attending the presentations and will connect them to the staff and the facilities. Many of these facilities already have exercise classes that are subsidized, if not, they can arrange for classes based on demand.
- People who have not been physically active before can potentially get active and reap the benefits of exercise and physically active.
- This will have a positive impact on their health.
- As more people get trained with this presentation, more lives can be touched.